



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3536

|   |   |                               |   |   |
|---|---|-------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/731,340  | <b>FILING OR 371(c) DATE</b><br>12/08/2003<br><b>RULE</b>   | <b>CLASS</b><br>312           | <b>GROUP ART UNIT</b><br>3637   | <b>ATTORNEY DOCKET NO.</b><br>APC01-CIP |
| <b>APPLICANTS</b><br>Peter C. Anderson, Sugar Hill, NH;   |   |                               |   |   |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/431,396 12/06/2002 and is a CIP of 10/166,346 11/26/2001 ABN ✓ <i>Joh</i><br>which is a CIP of 09/692,484 10/19/2000 PAT 6,446,564 ✓<br>which claims benefit of 60/171,123 12/16/1999 ✓<br>and claims benefit of 60/221,743 07/31/2000 ✓               |   |                               |   |   |
| <b>** FOREIGN APPLICATIONS *****</b> <i>None Joh</i>  |   |                               |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 03/10/2004   |   |                               |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance <i>Joh</i><br>Verified and Acknowledged Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>NH | <b>SHEETS DRAWING</b><br>17   | <b>TOTAL CLAIMS</b><br>26               |
| <b>INDEPENDENT CLAIMS</b><br>3  |   |                               |   |   |
| <b>ADDRESS</b><br>24222   |   |                               |   |   |
| <b>TITLE</b><br>Retractable and deployable panel  |   |                               |   |   |
| <b>FILING FEE RECEIVED</b><br>439   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |